Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Devon Mathis for Assembly 2022			Date of This Filing	11/01/2022	Date Stamp	CALIFORNIA 497		
AREA CODE/PHONE NUMBER (209)656-1542	I.D. NUMBER (if applicable 1435405)	Report No.	9504		For Official Use Only		
STREET ADDRESS			Amendment to Report No.		Page 1 of 5			
CITY Hilmar	STATE CA	ZIP CODE 95324	(explain below) No. of Pages	5				

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/01/2022	California Association of Highway Patrolmen PAC Sacramento, CA 95818 ID# 802001	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$1,000.00
11/01/2022	California Dental PAC Sacramento, CA 95814 ID# 742855	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$2,400.00
11/01/2022	Exxon Mobil Corporation Irving, TX 75039	□ IND □ COM □ OTH □ PTY □ SCC		\$1,500.00

*Contributor Codes	
IND - Individual PTY - Political	l Party
COM - Recipient Committee (other than PTY or SCC) SCC - Small COTH - Other	Contributor Committee

Reason for Amendment:

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LATE CONTRIBUTION REPORT

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AREA CODE/PHONE NUMBER (209)656-1542	I.D. NUMBER (if applicable) 1435405	Report No9504		For Official Use Only
STREET ADDRESS		Amendment to Report No.	Page 2 of 5	
CITY Hilmar	STATE ZIP CODE CA 95324	(explain below) No. of Pages 5		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/01/2022	Howard Jarvis Taxpayers Association Small Contributor Committee Sacramento, CA 95814 ID# 1238271	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$1,000.00
11/01/2022	Marathon Petroleum Corporation and its Subsidiaries Carson, CA 90810	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$2,500.00
10/31/2022	Occidental Low Carbon Venture Washington, DC 20006	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$2,000.00

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Reason for Amendment:

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LATE CONTRIBUTION REPORT

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AREA CODE/PHONE NUMBER (209)656-1542	I.D. NUMBER (if applicable) 1435405	Report No. 9504		For Official Use Only
STREET ADDRESS		Amendment to Report No.	Page 3 of 5	
CITY Hilmar	STATE ZIP CODE CA 95324	(explain below) No. of Pages 5		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/31/2022	Peace Officers Research Association of California PAC Sacramento, CA 95834 ID# 810830	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$7,700.00
10/31/2022	Phillips 66 Company Washington, DC 20004	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$2,900.00
11/01/2022	Sheet Metal Workers Local Union 104 Political Committee Livermore, CA 94551 ID# 850381	☐ IND ■ COM ☐ OTH ☐ PTY ☐ SCC		\$4,900.00

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Reason for Amendment:

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LATE CONTRIBUTION REPORT

NAME OF FILER Devon Mathis for Assembly 2022		Date of This Filing _	11/01/2022	Date Stamp	CALIFORNIA FORM 497		
AREA CODE/PHONE (209)656-1542	NUMBER	I.D. NUMBER (if applicable) 1435405	Report No	9504		For Official Use Only	
STREET ADDRESS		Amendme		Page 4 of 5			
CITY Hilmar		STATE ZIP CODE CA 95324	(explain below) No. of Pages	5			
Late Contrib	ution(s) Received						
DATE RECEIVED	FULL NAM	ME, MAILING ADDRESS AND ZIP CODE OF CONTF (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EI (IF SELF-EMPLOYED, ENTER NAME OF B		AMOUNT RECEIVED
11/01/2022	Western Dental Services I Orange, CA 92868	nc		☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC ☐ IND ☐ COM ☐ OTH			\$1,000.00
				□ PTY □ SCC			
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			
*Contributor Code IND - Individual COM - Recipient 0 OTH - Other	s Committee (other than PTY o	PTY - Political Party or SCC) SCC - Small Contributor Committe	ee				

Reason for Amendment:

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LATE CONTRIBUTION REPORT

NAME OF FILER Devon Mathis for Assembly 2	2022		Date of This Filing11/01/	/2022	Date Stamp	CALIFORNIA FORM 497	
AREA CODE/PHONE NUMBER (209)656-1542	R	I.D. NUMBER (if applicable) 1435405	Report No. 950	04		For Official Use Only	
STREET ADDRESS CITY Hilmar STATE CA 95324		Amendment to Report No.		Page 5 of 5			
		STATE ZIP CODE CA 95324	(explain below) No. of Pages 5				
Late Contribution	on(s) Made						
DATE MADE		NG ADDRESS AND ZIP CODE OF RECIPIENT MMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OR MEASURE AND JU		AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)	

Reason for Amendment: